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**JAN 06 2006**

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7590 11/02/2005

**Paul A. Gottlieb**  
**United States Department of Energy**  
**GC-62 (FORSTL) MS-6F-067**  
**1000 Independence Ave, S.W.**  
**Washington, DC 20585-0162**

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PATENT TRADEMARK OFFICE

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(Depositor's name)

(Signature)

(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/966,568	09/27/2001	Julie J. Hand	S-80,958	3784

TITLE OF INVENTION: DISPOSABLE REMOTE ZERO HEADSPACE EXTRACTOR

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$0	\$1400	02/02/2006

EXAMINER	ART UNIT	CLASS-SUBCLASS
HYUN, PAUL SANG HWA	1743	436-177000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.
<input checked="" type="checkbox"/> Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. <input checked="" type="checkbox"/> "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.	<ol style="list-style-type: none"> <li>1 <u>Joy Alwan</u></li> <li>2 <u>Thomas G. Anderson</u></li> <li>3 <u>Paul A. Gottlieb</u></li> </ol>

**3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)**

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

01/09/2006 HDMESS2 00000025 012752 09966568

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1400.00 DA

U.S. Department of Energy

Washington, D.C.

Please check the appropriate assignee category or categories (will not be printed on the patent):  Individual  Corporation or other private group entity  Government

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The Director is hereby authorized to charge the required fee(s), or credit any overpayment, to Deposit Account Number 01-2752 (enclose an extra copy of this form).

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a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.  b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature Paul A. Gottlieb

Date 1/6/2006

Typed or printed name Paul A. Gottlieb

Registration No. 26,733

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